

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) BIC-1/1196-1-C1								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of <b>Bernd Disse</b></td> </tr> <tr> <td style="width: 60%; padding: 2px;">Application Number <b>10/644,333</b></td> <td style="padding: 2px;">Filed <b>August 20, 2003</b></td> </tr> <tr> <td colspan="2" style="padding: 2px;">For <b>COMPOUNDS FOR TREATING INFLAMMATORY DISEASES</b></td> </tr> <tr> <td style="padding: 2px;">Group Art Unit <b>1618</b></td> <td style="padding: 2px;">Examiner <b>Vickie Y. Kim</b></td> </tr> </table>			In re Application of <b>Bernd Disse</b>		Application Number <b>10/644,333</b>	Filed <b>August 20, 2003</b>	For <b>COMPOUNDS FOR TREATING INFLAMMATORY DISEASES</b>		Group Art Unit <b>1618</b>	Examiner <b>Vickie Y. Kim</b>
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="margin-left: 40px;"> <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <span style="float: right;">\$<u>120.00</u></span>  <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <span style="float: right;">\$ _____</span>  <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <span style="float: right;">\$ _____</span>  <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <span style="float: right;">\$ _____</span>  <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) <span style="float: right;">\$ _____</span> </div> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ ____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card via EFS.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71                              Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).                              Registration number if acting under 37 CFR 1.34(a). _____.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="margin-top: 20px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;"><u>August 28, 2007</u> Date</p> </div> <div style="width: 45%;"> <p style="text-align: center;"><u>/John A. Sopp/</u> Signature</p> <p style="text-align: center;"><u>John A. Sopp, Reg. No. 33,103</u> Typed or printed name</p> </div> </div> </div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>										